



STATE OF MARYLAND

**DHMH**

---

**Maryland Department of Health and Mental Hygiene**

201 W. Preston Street • Baltimore, Maryland 21201

Robert L. Ehrlich, Jr., Governor – Michael S. Steele, Lt. Governor – Nelson J. Sabatini, Secretary

February 9, 2004

**TO:** Autism Waiver Providers (Not School-Based Providers)  
Maryland State Department of Education

**FROM:** Susan J. Tucker *Susan J. Tucker* Joseph E. Davis *Joseph E. Davis*  
Executive Director Executive Director  
Office of Health Services Office of Operations and Eligibility

**NOTE:** Please ensure that appropriate staff members in your organization and other appropriate contacts are informed of the contents of this transmittal

**RE:** Waivers Procedure Code Changes

---

The Maryland Medical Assistance Program is changing its procedure codes and billing formats. We are making these changes to comply with the Health Insurance Portability and Accountability Act (HIPAA).

Effective March 6, 2004, the Maryland Medical Assistance Program will change the procedure codes for the Waiver for Children with Autism Spectrum Disorder.

Additionally, effective March 6, 2004, the claim transactions from non-school Autism Waiver Providers to Department of Health and Mental Hygiene (DHMH) must utilize:

- **Electronic Transactions:** Providers must utilize the X12N 837P. (Ideally, you should begin submitting on this claim type on or before March 6, 2004. However, if your software vendor is not prepared to start processing the 837P, continue billing with your current electronic format until your vendor updates your billing system and completes testing.)

**Paper Transactions:** Providers should continue submitting paper transactions using the CMS-1500 form.

**This memorandum discusses the changes for non-school based providers. A second memorandum will review all the school-based services coding and transaction changes.**

If you have questions, contact the DHMH Autism Waiver Coordinator at (410) 767-5220

Toll Free 1-877-4MD-DHMH • TTY for Disabled – Maryland Relay Service 1-800-735-2258

Web Site: [www.dhmh.state.md.us](http://www.dhmh.state.md.us)



## **Waiver for Children with Autism Spectrum Disorder**

### **PROCEDURE CODE CHANGES Effective January 3, 2004 – Date of Service**

<b>AUTISM WAIVER SERVICES</b>			
<b>Current Code</b>	<b>Code for dates of service on or after 1/3/2004</b>	<b>Service</b>	<b>Unit of Service</b>
A9300	Z9300	Regular residential habilitation	1 hour
A9301	Z9301	Intensive residential habilitation	1 hour

### **PROCEDURE CODE CHANGES Effective March 6, 2004 – Date of Service**

<b>AUTISM WAIVER SERVICES</b>			
<b>Current Code</b>	<b>Code for dates of service on or after 3/6/2004</b>	<b>Service</b>	<b>Unit of Service</b>
A9304	W9304	Regular day habilitation autism waiver	1 hour
A9305	W9305	Intensive day habilitation autism waiver	1 hour
A9306	W9306	Intensive individual support service	1 hour
A9307	W9307	Therapeutic integration service	1 day
A9311	W9311	Supported employment autism waiver	½ day
A9314	W9314	Respite care autism waiver	1 hour
A9315	W9315	Family training autism waiver	1 hour
A9320	W9320	Environmental accessibility	1 item
A9322	W9322	Initial assessment autism waiver	1 unit per lifetime
A9323	W9323	Ongoing assessment autism waiver	1 month
A9324	W9324	Reassessment autism waiver	1 unit

**For claims with a Date of Service before March 6, 2004, use the “A” codes. For claims with a Date of Service on or after March 6, 2004, use the “W” codes.**

Example#1 – A provider submits a claim in March 2004 for respite care rendered on January 15, 2004. This claim must be submitted on either the paper CMS-1500 or the electronic X12N 837P using the old (“A9314”) procedure code.

Example#2 – A provider submits a claim in March 2004 for respite care rendered on January 15, 2004. This claim must be submitted on either the paper CMS-1500 or the “modified CMS-1500”/electronic X12N 837P using the new (“W9314”) procedure code.

**The Program will not pay any claims with the “A” codes for dates of service on or after March 6, 2004.**

**Billing Transaction Changes**  
**Effective March 6, 2004 – Date of Bill**

**Electronic Transactions**

In the future, all non-school electronic transactions must be submitted as X12N 837P transactions.

Ideally, Autism Waiver Providers should begin submitting claims a X12N 837P transaction on or before March 6, 2004. However, DHMH recently learned that some of your software vendors may not be prepared to start processing 837P. If your vendor cannot process these claims on March 6, 2004, continue billing on the current electronic HCFA 1500 until your vendor updates your billing system and completes testing. Please consult your Information Technology staff or billing software vendor regarding these formats.

Companion Guides, developed by DHMH to assist providers with the ASC X12N Transactions, can be found at <http://www.dhmf.state.md.us/hipaa/transandcodesets.html>.

Providers who send electronic transmissions directly to Medicaid must test for HIPAA compliance before they can transmit actual claims. DHMH offers free testing for its trading partners which can be accessed at: <http://www.dhmf.state.md.us/hipaa/testinstruct.html>. This testing tool provides information on test files and errors.

**Trading Partner Agreement and Submitted Identification Form**

DHMH must have both the Trading Partner Agreement and Submitter Identification Form on file for each provider before accepting any HIPAA transactions including 837P claims. If you have more than one provider number, you must submit separate Trading Partner Agreements and Submitter Identification Forms for each provider number.

Both forms have a contact phone number if you have additional questions. It is imperative that you complete the necessary form(s) and return them prior to submitting electronic transactions. Please mail the agreements to:

Rita Tate  
201 W. Preston St. Rm. LL3  
Baltimore MD 21201  
Attn: HIPAA Billing Agreements

**Paper Transactions**

Autism Waiver Providers should continue to submit paper CMS-1500 claims as they currently do.